

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS2089AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/14/2009
NAME OF PROVIDER OR SUPPLIER THE PLAZA AT SUN MOUNTAIN		STREET ADDRESS, CITY, STATE, ZIP CODE 6031 WEST CHYENNE AVE LAS VEGAS, NV 89108		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure conducted at your facility on 7/14/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility was licensed for 150 Residential Facility for Group beds for elderly and disabled persons and/or persons with mental illnesses, 50 beds Category I residents, 100 beds Category II residents. The census at the time of the survey was 63 residents. Fourteen files were reviewed and eleven employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D.</p> <p>There were no complaints investigated.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 070 SS=F	<p>449.196(1)(f) Qualifications of Caregiver-8 hours training</p> <p>NAC 449.196 1. A caregiver of a residential facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility.</p> <p>This Regulation is not met as evidenced by:</p>	Y 070		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1 Based on record review on 7/14/09, the facility failed to ensure 10 of 11 caregivers received eight hours of annual training (Employee #1, #3, #4, #5, #6, #7, #8, #9, #10 and #11). Severity: 2 Scope: 3	Y 070		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Based on record review on 7/14/09, the facility failed to ensure 5 of 11 employees complied with NAC 441A.375 regarding tuberculosis testing (Employee #2, #5, #6, #8 and #11). This was a repeat deficiency from the State 10/9/08 Licensure survey. Severity: 2 Scope: 3	Y 103		
Y 105 SS=F	449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to	Y 105		

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Y 105	Continued From page 2 449.185, inclusive. This Regulation is not met as evidenced by: Based on record review on 7/14/09, the facility failed to ensure 6 of 11 caregivers had current, at least once every 5 years, criminal history background checks completed (Employee #3, #4, #5, #6, #7, and #11). Employee #3, #4, #6, and #7 failed to have a current state and FBI check. Employee #5 and #11 failed to have a signed criminal history statement, current state and FBI check, and fingerprints. This was a repeat of the 10/9/08 State Licensure survey. Severity: 2 Scope: 3	Y 105			
Y 178 SS=C	449.209(5) Health and Sanitation-Maintain Int/Ext NAC 449.209 5. The administrator of a residential facility shall ensure that the premises are clean and that the interior, exterior and landscaping of the facility are well maintained. This Regulation is not met as evidenced by: Based on observation on 7/14/09, the facility failed to ensure the interior was maintained. Carpets in 5 sampled apartments, the dining room, hallway, and library required carpet cleaning. Based on observation in 2 of 2 common laundry rooms, the facility failed to ensure that lint and debris was removed from behind the dryers.	Y 178			

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Y 178	Continued From page 3 Severity: 1 Scope: 3	Y 178		
Y 273 SS=F	449.2175(4) Service of Food - Special Diets NAC 449.2175 4. A resident who has been placed on a special diet by a physician or dietitian must be provided a meal that complies with the diet. The administrator of the facility shall ensure that records of any modification to the menu to accommodate for special diets prescribed by a physician or dietitian are kept on file for at least 90 days. This Regulation is not met as evidenced by: Based on observation and record review on 7/14/09, the facility failed to modify the menu for a special diet for X of X residents (Resident #4, #5, #6, #7, #9 & #11). Severity: 2 Scope: 3	Y 273		
Y 354 SS=D	449.222(4) Bathrooms and Toilet Facilities NAC 449.222 4. All bathrooms and toilet facilities must be located convenient to sleeping, recreational and living areas. A bathroom must have a window that can be opened or a vent to outside the facility. This Regulation is not met as evidenced by: Based on observation on 7/14/09, the facility failed to ensure the bathrooms were vented to the outside in 3 of 13 sampled resident rooms (Room	Y 354		

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Y 354	Continued From page 4 #194, #198, and #199). Severity: 2 Scope: 1	Y 354		
Y 693 SS=E	449.2712(2) Oxygen-Caregiver monitor resident ability NAC 449.2712 2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall: (a) Monitor the ability of the resident to operate the equipment in accordance with the orders of a physician. (b) Ensure That: (1) The resident's physician evaluates periodically the condition of the resident which necessitates his use of oxygen; (2) Signs which prohibit smoking and notify persons that oxygen is in use are posted in areas of the facility in which oxygen is in use or is being stored; (3) Persons do not smoke in those areas where smoking is prohibited; (4) All electrical equipment is inspected for defects which may cause sparks. (5) All oxygen tanks kept in the facility are secured in a stand or to a wall; (6) The equipment used to administer oxygen is in good working condition; (7) A portable unit for the administration of oxygen in the event of a power outage is present in the facility at all times when a resident who requires oxygen is present in the facility; and (8) The equipment used to administer oxygen is removed from the facility when it is no longer needed by the resident.	Y 693		

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Y 878	Continued From page 6 This was a repeat deficiency from 6/8/09, 4/9/09 & 10/9/08 State Licensure surveys. Severity: 2 Scope: 1	Y 878			
Y 920 SS=F	449.2748(1) Medication Storage NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key. This Regulation is not met as evidenced by: Based on observation on 7/14/09, the facility failed to keep medications for 5 of 15 residents in a locked area (Resident #3, #5, #8, #10, and #11).	Y 920			

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Y 920	Continued From page 7 Severity: 2 Scope: 3	Y 920		
Y 923 SS=D	449.2748(3)(b) Medication Container NAC 449.2748 3. Medication, including, without limitation, any over-the-counter medication or dietary supplement, must be: (b) Kept in its original container until it is administered. This Regulation is not met as evidenced by: Based on observation on 7/14/09, the facility failed to keep medications belonging to 1 of 15 residents in their original container (Resident #8). Severity: 2 Scope: 1	Y 923		

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